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# Establishment and Verification of Required Education and Experience of Personnel Quality Implementing Procedure ID: OSTI-LLNL-QIP-2.1, Rev.0, Mod.0

V. J. Barish, L. A. Gouveia

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## ESTABLISHMENT and VERIFICATION of REQUIRED EDUCATION and EXPERIENCE of PERSONNEL

*Quality Implementing Procedure ID: OSTI-LLNL-QIP-2.1, Rev. 0, Mod. 0*

*Effective 2/25/05*

### 1. PURPOSE

This Quality Implementing Procedure (QIP) establishes the responsibilities and processes of the Office of Science & Technology and International (OSTI)-Lawrence Livermore National Laboratory (LLNL) Project to ensure personnel meet minimum education and experience requirements.

### 2. SCOPE

This QIP describes the Verification of Education and Experience (VoEE) documentation requirements for the OSTI-LLNL Project staff to meet the requirements of the OSTI-LLNL Quality Assurance Plan (QAP) which implements the U.S. Department of Energy (DOE) Office of Civilian Radioactive Waste Management (OCRWM) *Quality Assurance Requirements and Description* (QARD), DOE/RW-0333P. This procedure has been prepared in accordance with OSTI-LLNL-QIP-5.0, *Preparing the Quality Assurance Plan and Quality/Technical Implementing Procedures*.

This procedure applies to OSTI-LLNL personnel and direct-support staff who perform or verify scientific investigation, data, or software development activities, and personnel who manage these activities. This procedure also applies to non-LLNL personnel who conduct quality-affecting work on the OSTI-LLNL Project under OSTI-LLNL supervision.

VoEEs performed and approved for personnel working on the Yucca Mountain Project (YMP) meet the requirements of this procedure and shall be applicable to the OSTI-LLNL Project.

### 3. PROCEDURE

#### 3.1 Establishment of Position Description

The **Project Manager (PM)** (or designee) shall ensure that:

- 3.1.1 The appropriate position description is documented for each position occupied by a person who shall perform or manage scientific investigation, data or software development activities, and Quality Assurance (QA) Technical Support activities.
- 3.1.2 Position descriptions contain verifiable minimum education and experience requirements as well as define the types of duties and responsibilities expected to be performed.
- 3.1.3 Each employee has a documented and completed VoEE (Attachment 1).

- 3.1.4** Subcontractor personnel, must either be on the OCRWM Qualified Suppliers List (QSL) for the applicable services, or if conducting work under OSTI-LLNL supervision, submit appropriate VoEE documentation using position descriptions that meet the criteria noted in Section 3.1.1 and 3.1.2.

### **3.2 Verification of Education and Experience**

- 3.2.1** The **PM/Deputy PM (DPM)** shall request that the LLNL Human Resources Organization (or the appropriate subcontractor) perform the verification of education and submit the verification to the OSTI-LLNL Training Coordinator.
- 3.2.2** The **Training Coordinator** shall verify all periods of employment used to qualify the individual, including the employer name and address (city and state), title of the position held, and the period during which the position was occupied by the individual using one of the following methods:
- A. Review objective evidence in official personnel file.
  - B. Contact the former employer(s) or verification service(s).
  - C. If only the last position title is available, then note the title in the documentation and count the experience toward the requirements of the position.
  - D. If no position title can be obtained, then do not consider the experience verified.

### **3.3 Documentation of Verification**

- 3.3.1** The **Training Coordinator** shall:
- A. Document the results obtained from Section 3.2 on VoEE (Attachment 1) including the date of the contact, name (if provided), title (if provided), and department of the individual contacted.
  - B. Document the name of the verification service, if applicable.
  - C. Delete any personal information not required for VoEE from all documentation.
  - D. Ensure that applicable supporting evidence, such as records of telephone calls, copies of official transcripts, copies of evidence from official personnel file, copies of letters from employers or degree-granting institutes, and printed evidence of Internet verifications, is attached to or noted on the documentation.

- E. Ensure that all records associated with the VoEE process are treated as Privacy Act of 1974 System of Records per OSTI-LLNL-QIP-17.0, *Records Management*.

- 3.3.2 If minimum education and/or experience cannot be verified, the **Training Coordinator** shall prepare a written justification for the personnel assignment using a format similar to VoEE Justification Statement (Attachment 2).

### 3.4 Approval

- 3.4.1 The **PM/DPM** shall ensure that the individual's qualifying education and experience is commensurate with the requirements established in the position description for the assigned position and sign the verification document, as appropriate.

- 3.4.2 If minimum education and experience cannot be verified, the **PM/DPM** shall approve the written justification for the personnel assignment as described in Section 3.3.2.

- 3.4.3 The **Training Coordinator** shall maintain a file of VoEE documentation for each employee.

## 4. RECORDS

QA records associated with this procedure fall under the Privacy Act of 1974 System of Records and require special handling per OSTI-LLNL-QIP-17.0. QA records shall be submitted to the Records Center (RC) per OSTI-LLNL-QIP-17.0 as a records package or as individual records.

### 4.1 QA Records

Records Package:

- Documentation of VoEE
- Position Description
- Resume or *curriculum vitae*
- Supporting Evidence of VoEE (if applicable)
- VoEE Justification Statement (if applicable)

### 4.2 Non-QA Long-Term Records

None

### 4.3 Non-QA Short-Term Records (three years or less retention)

None

## 5. RESPONSIBILITIES

- 5.1 The **Project Manager** (PM) shall be responsible for establishing requirements of education and experience, and the duties and responsibilities to be performed, for each applicable OSTI-LLNL position.
- 5.2 The **Deputy Project Manager** (DPM) (or designee) shall be responsible to ensure the individual's qualifying education and experience is commensurate with the established requirements for the assigned position and approve the VoEE and/or the Justification Statement.
- 5.3 The **Training Coordinator** shall be responsible for the verification and documentation of education and experience, as directed by the PM (or designee).
- 5.4 The **Records Coordinator** shall be responsible for submittal of QA Records to the RC, in accordance with OSTI-LLNL-QIP-17.0 and the Privacy Act of 1974.

## 6. ACRONYMS AND DEFINITIONS

### 6.1 Acronyms

DOE	U.S. Department of Energy
LLNL	Lawrence Livermore National Laboratory
OCRWM	Office of Civilian Radioactive Waste Management
OSTI	Office of Science & Technology and International
PM	Project Manager
QAP	Quality Assurance Plan
QARD	Quality Assurance Requirements and Description
QIP	Quality Implementing Procedure
RC	Records Center
VoEE	Verification of Education and Experience
YMP	Yucca Mountain Project

### 6.2 Definitions

**Position Description:** Documentation maintained for each employee that contains verifiable minimum education and experience requirements as well as defines the types of duties and responsibilities expected to be performed.

## 7. REFERENCES

DOE/RW-0333P, *Quality Assurance Requirements and Description*

OSTI-LLNL-QIP-5.0, *Preparing the Quality Assurance Plan and Quality/Technical Implementing Procedures.*

OSTI-LLNL-QIP-17.0, Records Management

Privacy Act of 1974

8. ATTACHMENTS

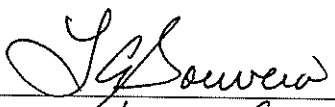
Attachment 1 - VoEE

Attachment 2 - VoEE Justification Statement


9. REVISION HISTORY

2/25/05 Revision 0, Modification 0  
Initial Issue

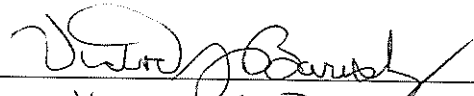
10. APPROVALS

  
Preparer: Leigh Gouveia


2/25/05  
Date:

  
Technical Reviewer: DINHONG HU

2/25/05  
Date:

  
QA Reviewer: VICTOR J. BARISH JR

2/25/05  
Date:

  
Project Manager: DAVID B. McALLEN

2/25/05  
Date:



OSTI - LLNL

QA:

# **VERIFICATION OF EDUCATION AND EXPERIENCE** **(NON-FEDERAL EMPLOYEE)**

QA

Page 1 of

CONTAINS PRIVACY ACT INFORMATION

1. This documents that \_\_\_\_\_ meets the qualification  
 2. requirements for the position of the \_\_\_\_\_.

A complete description of the duties and responsibilities and the minimum education requirements for this position are defined in the Position Description (attached).

The individual meets the qualifications requirement(s) as defined in the Position Description summarized below.

3. ☐ College Degree \_\_\_\_\_ (B.A./B.S.; M.A./M.S.; PhD.) in one of the following disciplines (fill in applicable discipline) \_\_\_\_\_
4. ☐ \_\_\_\_\_ (number) of years of applicable experience in an acceptable field.
5. ☐ Other (Specify): \_\_\_\_\_

The qualifying education and / or experience have been verified in the following manner:

## EDUCATION

The verification of education indicates this employee attained the following degree(s) from the named degree-granting institution(s) on the dates indicated:

Degree/Discipline	Accredited Institutions	Date

7. This verification was completed by the following means:

- ☐ Telephone call to the degree-granting institution. Name and title of person and date contacted.

Name of  
contactTitle of  
contactDate of  
contact

- ☐ Automated telephone or Internet
- ☐ Letter from degree-granting institution (copy attached)
- ☐ Official Transcript from the degree-granting institution:

8. Accreditation Organization or Equivalent





**OSTI - LLNL**  
**VERIFICATION OF EDUCATION AND EXPERIENCE**  
(NON-FEDERAL EMPLOYEE)

QA: QA

CONTAINS PRIVACY ACT INFORMATION

Page 2 of     **9. EXPERIENCE**

The verification of experience indicates this individual gained \_\_\_\_\_ (number of) years/months for the following employer(s) as shown in the attached Detailed Experience Record.

**10. JUSTIFICATION**

\_\_\_\_\_ A justification is included since the minimum required education or experience of the individual could not be verified.

**11. Printed Name of Individual Who Conducted Verification:****Date****12. REVIEW AND CONCURRENCE**

*I have reviewed the above-named individual's education and experience and concur that he/she is fully qualified to perform the duties of the position identified above.*

Printed Name of OSTI-LLNL Project Manager/Deputy Project Manager (or designee):

Signature of OSTI-LLNL Project Manager/Deputy Project Manager (or designee):

**Date****Attachments**

1. Position Description
2. Justification Statement (if applicable)
3. Supporting evidence (if applicable)
4. Evidence of previous verification (if applicable)

The information requested on this form is authorized by the Privacy Act of 1974 (Public Law 93-579). Collection of the information requested is authorized by the Nuclear Waste Policy Act of 1982, as amended, the Atomic Energy Act of 1954 (Public Law 83-703) and Nuclear Regulatory Commission implementing regulations at 10 CFR 60, subparts G and H.



**OSTI - LLNL**  
**VERIFICATION OF EDUCATION AND EXPERIENCE**  
**(NON-FEDERAL EMPLOYEE)**

QA:

CONTAINS PRIVACY ACT INFORMATION

Page 3 of     Name: 

Employer:		Position Title:		Experience Gained (yrs/mo):
Address (City, State):		Period Occupied:		
Means of Verification*:	Date Verified:	Individual Verifying:		
If by Phone Contact:	Contact Name:	Contact Title:	Contact Date:	

Employer:		Position Title:		Experience Gained (yrs/mo):
Address (City, State):		Period Occupied:		
Means of Verification*:	Date Verified:	Individual Verifying:		
If by Phone Contact:	Contact Name:	Contact Title:	Contact Date:	

Employer:		Position Title:		Experience Gained (yrs/mo):
Address (City, State):		Period Occupied:		
Means of Verification*:	Date Verified:	Individual Verifying:		
If by Phone Contact:	Contact Name:	Contact Title:	Contact Date:	

Employer:		Position Title:		Experience Gained (yrs/mo):
Address (City, State):		Period Occupied:		
Means of Verification*:	Date Verified:	Individual Verifying:		
If by Phone Contact:	Contact Name:	Contact Title:	Contact Date:	

\*Means: 1 = Review of objective evidence in official personnel folder

2 = Telephone contact with former employer or service

3 = Automated telephone service or Internet

4 = Letter from former employer

Enter Total Experience (yr/mo)  
on Last Detail Page

### Instructions for Completing the VoEE Documentation

This form is used to document the VoEE and the Deputy Project Manager's concurrence that the named individual is qualified to perform the duties of the position. The Deputy Project Manager is responsible for ensuring completion of the form.

1. Record Employee's name
2. Record the position title as documented on the job description.
3. Enter the applicable degree level required by the job description.
4. Enter the minimum number of years experience required in addition to the degree. If none, enter "0."
5. Enter any other specific education or experience required. If credit for experience is permitted in lieu of a degree, enter this information here (e.g., "eight years direct experience in lieu of BA/BS," "Associate and four years direct experience in lieu of BA/BS").

Check the appropriate box preceding each of the requirements noted above that are met by the individual.

6. Enter the degree level, degree discipline, date granted (year or month/year), and name of institution granting the degree for the highest applicable degree attained by the individual.
7. Check the means used to verify the education.

If the verification was received verbally, record the name of the contact (if provided), contact's title (if provided), department, date verified, and name of person verifying the education.

8. Enter the name of the accrediting institution, or equivalent, for the highest applicable degree attained by the individual.
9. Enter the total number of years and months verified experience from the Detailed Experience Record.
10. If minimum required education or experience of the individual could not be verified, check the box indicating a Justification Statement is included.
11. Enter the name of individual performing the verification.
12. Enter the name of Project Manager/Deputy Project Manager. Sign and date the form.

## **Instructions for Completing the VoEE Documentation (Continued)**

### **Detailed Experience Record**

**Employer:** Record name of employer.

**Address:** Record city and state where employed.

**Position Title:** Record title of position held for which relevant experience credit is given.

**Period Occupied:** Record the period the position was occupied (month/year to month/year).

**Experience Gained:** Enter the years and months experience gained for the position (e.g., 3/8).

**Means of Verification:** Enter the number corresponding to means of verification according to the key at the bottom of the form.

**Date Verified:** Enter date the contact was made and the information verified.

**Individual Verifying:** Record name of individual who verified the experience.

**Contact Name (if provided):** If the verification was received verbally, record contact name (if provided).

**Contact Title (if provided):** If the verification was received verbally, record title (if provided) or department of the contact.

Use as many Detailed Experience Records as required to record each position and period occupied. Enter total number of years and months verified on the last detailed page.



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**JUSTIFICATION STATEMENT**

Contains Privacy Act Information

Page: \_\_\_\_ OF \_\_\_\_

Individual

Position:

Despite the fact that I was unable to verify the following education/experience qualifications for the individual:

I approve the individual for the following reason(s):

OSTI-LLNL Project Manager/Deputy Project Manager:  
(printed name)

Signature:

Date:

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